

Lowell Public Schools

Lowell High School 50 Fr. Morissette Blvd Lowell, Massachusetts 01852-1050



Michael Fiato Head of School Tel. (978) 937-8900 Fax (978) 937-8902 Email: MFiato@lowell.k12.ma.us

Liam Skinner, Interim Superintendent

July 24, 2023

Lowell Public Schools 155 Merrimack St Lowell, MA 01852

Re: Solon Show Choir Invitational

Dear Mr. Skinner,

I'm writing to request permission for Michael Winslow and Rafael Quiles to bring Lowell High School students to compete in the Solon Show Choir Invitational in March of 2024. Show choir styles and performance levels differ greatly depending on the area of the country. Lowell High School students generally have only been exposed to what we do in New England. We would like to give them the opportunity to compete in the Midwest and to be able to evaluate some of these other groups. We took this trip in 2020 and it was highly beneficial to our students. This is a great opportunity for our students to see qualities of advanced performers and work to apply them to their own performance.

Music Standards Addressed:

- Standard 1: Students will sing, alone and with others, a varied repertoire of music.
- Standard 3: Students will play instruments, alone and with others, to perform a varied repertoire of music.
- Standard 5: Students will describe and analyze their own music and the music of others using appropriate music vocabulary. When appropriate, students will connect their analysis to interpretation and evaluation
- Standard 6: Students will describe the purposes for which works of dance, music, theater, visual arts, and architecture
 were and are created, and, when appropriate, interpret their meanings.
- Standard 8: Students will demonstrate their understanding of styles, stylistic influence, and stylistic change by identifying when and where artworks were created, and by analyzing characteristic features of art works from various historical periods, cultures, and genres.



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Trip Itinerary Friday, March 1, 2024

6:00 AM Depart Lowell High School 11:00 AM Lunch stop en route 3:30 PM Arrive at Splash Lagoon Indoor Water Park (Erie, PA)Hotel stay in Erie, PA

Saturday, March 2, 2024

Early morning departure for Solon High School (Solon, OH) Competition all day. Hotel stay in Twinsburg, OH area

Sunday, March 3, 2024

9:00 AM Depart for LHS 1:00 PM Lunch stop en route 6:00 PM Dinner stop en route 10:00 PM Return to Lowell High School

Trip Costs (Per student)

\$170.00 Transportation \$30.00 Splash Lagoon Admission \$100.00 Meals \$100.00 Hotel Accommodations TOTAL: \$400.00

The cost of the trip will be paid for partially by students and partially through fundraising. The cost to the school department will potentially be substitute coverage for Friday, March 1st, 2024, for chaperones Michael Winslow and Rafael Quilles

TOTAL STUDENTS: 100 TOTAL ADULTS: 9

The following adults will be chaperoning the trip: Steven Aitchison, Manuela Campbell, Andrew Costa, Peter Doherty, Rafael Quilles, Heidi Sandler, Mary Silva, Michael Silva. All outsiders will be CORI checked prior to the trip.

Sincerely,
Michael Fiato
Head of Schools

LHS Field Trip Request Form (Must be turned in 4 weeks in advance)

A trip is considered an official Lowell High School Field Trip when it is connected to any LHS class, student activity, club, sport or special program whether they occur on a school day or on a weekend. Name of Staff Member making the request: Michael Winslow Date of Request: 5/11/23 Class or group attending: Showchoir Description of field trip and how it relates to the curriculum: Competition in Ohio. This will allow students to observe and Learn from other groups. No. of Students: 100 No. of Chaperones: Type and number of vehicles: 200 Approx. Mileage 128 There should be at least one chaperone for every 20 students. Names and cell-phone numbers for chaperones: Coverage is needed for Full Day (OR) __Specific Periods (list)___ No. of substitutes requested 2 Covered by other Funding Charges to School Department Charges to Student (specify grant or other source) (per person) (per person) 4 3000 Stroent 10000 Activities Transportation: Entry Fees: Meals: Other: Please list any previous field trips you have taken this school year by date and description: Steven Artchison, Manuela Campbell, Andrew Costa, Peter Doherty, Rafael Qulles, Heidi Sandler, Mary Silva, Michael Silva You are required to meet the following conditions: Obtain parental and teacher permission Provide a list to Data Processing of students attending (48 hours prior to the field trip) Meet all requirements of the field trip site you are going to File a post-trip report to your department chair and the Head of School if requested Ensure that students have a post-field trip instructional follow-up if the field trip is classroom-based and academic in nature Arrange for students to be returned to LHS or home Reviewed by Department Chair: __

Approved by Head of School:

ALLOW 4 WEEKS FOR PROCESSING
(6 WEEKS IF SCHOOL COMMITTEE APPROVAL IS NEEDED)
-Please fill out all provided fields to avoid any delays of the approval process-

REMIT TO: CURRICULUM OFFICE

| Name of Staff Member: Ratal | / Quilles | | - |
|---|-------------------------------------|--------------------------|-----------------------------------|
| School Lowell High Sch | 00 Grade Level: 9- | 17 Subject: | Spanish |
| Workshop Title Solon Show | wehoir Invita | ational | |
| Organization/Department Presenting Wo | | | 1 cost 6 |
| Date(s) of Workshop: Compe | th tion for | show do | 5 |
| Substitute Coverage Needed? | No (Yes | 7 | (Please circle one) |
| If Para is to serve as the coverage, indicat | e Para's name here | | |
| In State () | *Out of State (U | *Overnight (| (Please 🗹 one) |
| Signature of Applicant: Signature of Approval by Principal | Letter to the Superinter dent of OL | it of State/Overnight at | Date 5/17/2 |
| **Please provide source of fund | ing, occount number and/or gr | ont name, and num | ber for workshop and substitute** |
| Funding Source | Workshop | Substitute | Initials of Approval Department |
| Title I School | | | |
| Title I District | | | |
| Individual School Fund # | | | |
| Professional Development District | | | |
| SPED | | | |
| Other Grants/Programs (Provide Grant/Program Name & No.#) | | | |
| Signature of Central Administrator: | | | Date |
| Sub Reserved. | | | Date |
| Request Denied by: | | | Date |

^{*} A letter to the Superintendent for all out-of-state or overnight activities is required at the time the Lilat Form is submitted and the "completed package" is to be sent to the Lawell Teacher Academy for processing

WORKSHOP/CONFERENCE/FIELD TRIP/ACTIVITY

ALLOW 4 WEEKS FOR PROCESSING
(6 WEEKS IF SCHOOL COMMITTEE APPROVAL IS NEEDED)

-Please fill out all provided fields to avoid any delays of the approval process-

REMIT TO: CURRICULUM OFFICE

| Name of Staff Member: Micha | e Winslow | | • • • • • • • • • • • • • • • • • • • | | |
|---|--------------------------------|-------------------------------|---------------------------------------|--|--|
| school Lowell High Sch | | | Choral Music | | |
| Workshop Title: Solon Sh | | | | | |
| Organization/Department Presenting Wo | orkshop. <u>Solon</u> | High Schoo | 1 cost 6 | | |
| Date(s) of Workshop: Competition for 145 showchoir | | | | | |
| Substitute Coverage Needed? | No (| Yes | (Please circle one) | | |
| If Para is to serve as the coverage, indicate Para's name here | | | | | |
| In State () | *Out of State (| *Overnight (| (Please 🗹 one) | | |
| | * Letter to the Superintendent | of Out of State/Givernight at | nached ** | | |
| Signature of Applicant Mucha | el allish | | Date 5/11/23 | | |
| Signature of Approval by Principal | mo | | | | |
| **Please provide source of funding, account number and/or grant name, and number for workshop and substitute ** | | | | | |
| Funding Source | Workshop | Substitute | Initials of Approval Department | | |
| Title I School | | | | | |
| Title District | | | | | |
| Individual School Fund # | | | | | |
| Professional Development District | | | | | |
| SPED | | | | | |
| Other Grants/Programs (Provide Grant/Program Name & Nc.#) | | | | | |
| Signature of Central Administrator:Date: | | | | | |
| Sub Reserved: | | | Date: | | |
| Request Denied by | | | Date: | | |

^{*}A letter to the Superintendent for all out-of-state or overnight activities is required at the time the Lilat Form is submitted and the "completed package" is to be sent to the Lowell Teacher Academy for processing

Lowell Public Schools: OVERNIGHT FIELD TRIP CHECKLIST

The School Committee recognizes that first-hand learning experiences provided by field trips are a most effective and worthwhile means of learning. It is the desire of the Committee to encourage field trips as an integral part of the program of the schools.

Specific guidelines and appropriate administrative procedures shall be developed to screen, approve and evaluate trips and to ensure that all reasonable steps are taken for the safety of the participants. These guidelines and appropriate administrative procedures shall ensure that all field trips have the approval of the Head of School and that all overnight trips have the prior approval of appropriate Administrative level.

Approval of the School Committee must be granted prior to money being collected, arrangements being made, or parental consent being issued for all <u>overnight</u> field trips.

The following guidelines are set to implement the planning of field trips as part of, and directly related to, classroom learning activities. All guidelines must be included in the request.

| | The application for approval for an overnight field trip which requires students to miss a day or more of school must include written justification from the teacher proposing the trip. |
|---------------|---|
| | The application for approval for an overnight field trip which requires students to miss a day or more of school must include a written statement of the learning standards the trip will address. |
| | The application for approval for an overnight field trip must include an itemization of all costs associated with the trip and the funding source. |
| | All proposed field trips must have the approval of the school building administrator. |
| | All day trips must be within budgetary allotments for such purpose and be approved by the superintendent. Any trip, for which there is no budget allotment, must have advance approval of the School Committee. |
| | Each student who goes on a field trip must have written parental permission. |
| | Enough supervision must be provided so that discipline on the trip is effective. |
| | All trips must be well planned, properly timed, and related to regular learning activities. |
| | All Chaperones/other adults MUST be coried. Please list chaperones that are |
| | Steven Pitchison, Manuela Campbell, Andrew Costa, Peter Doherty, |
| | Steven Pitchison, Manuela Campbell, Andrew Costa, Peter Doberty, Rotael Quilles, Heid: Sandler, Mary Silva, Michael Silva |
| | Head of School: Date: 5/17/2 3 Central Administrator: Date: |
| Digitature 01 | Continui / Idininistrator. |